

OFFICE USE ONLY

PHONE: (573) 522-0107 FAX: (573) 751-4864

EMAIL: COMMERCIALPERMITS@MDC.MO.GOV

Application for Nonresident Fur Dealer Permit (CODE 525)

All required (*) fields must be completed or application will be returned to applicant for completion.

*SECTION 1: Are you applying as an individual or business? Selection will determine the name on permit.							
☐ INDIVIDUAL (If Individual, skip Section 4)	☐ BUSINESS	☐ BUSINESS (If Business, skip Section 3)					
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SECTION 2: If renewing a commercial permit, enter t	he permit number here.	Permit #:					
SECTION 3: Individual Information (Permit will be iss	sued in the individual's na	me.)					
*County:							
*Individual Name:							
Doing Business As (If applicable – provide fictitious business name registered with Mo	O Secretary of State):						
*Address:							
*City:	*State:	*ZIP Code:					
If PO BOX, provide physical address:							
*Telephone:	Email:						
SECTION 4: Business Information (Permit will be iss be registered and in good standing with the Missour www.sos.mo.gov or call (573) 751-4936)							
*SELECT TYPE OF ENTITY: GENERAL PARTNERSHIP	☐ LIMITED PARTNERSHIP	☐ LIMITED LIABILITY PARTNERSHIP					
☐ GENERAL CORPORATION ☐ LIMITED LIABILITY COMPANY	☐ NONPROFIT CORPORATION						
*County:							
*Business Name:							
Doing Business As (If applicable – provide fictitious business name registered with Mo	O Secretary of State):						
*Business Address:							
*City:	*State:	*ZIP Code:					
If PO BOX, provide physical address:							
*Telephone:	Email:						
*Designated Representative's Name (for all Department interaction) ¹	:						
*Designated Representative's Address (if different than above):							
*City:	*State:	*ZIP Code:					
*Telephone:	Email:						
¹ Designated representative is an individual designated by the business as the compliance, records, inspections and citations. The business (permittee) is reany time.							
PERMIT TYPE		PRICE					
□ Nonresident Fur Dealer's Permit (Code 525)		\$300.00					
Signature constitutes acceptance of all rules pertaining to the above permit(s) according	ording to the Wildlife Code of Missouri.						
Applicant Signature:		Date:					
Applicant's Title (if applicable – required for business applications):							

All permits expire June 30 unless otherwise provided in the Wildlife Code of Missouri.

This is not a permit and does not entitle the applicant to operate.

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Nonresident Fur Dealers – If planning to purchase in Missouri at a location other than established fur actions or the location of a licensed Missouri fur dealer(s), list the business name and complete address of the location below.							
Business Name:							
Address:		City:		State:	Zip Code:		
County:			Telephone:				
Business Name:							
Address:		City:		State:	Zip Code:		
County:			Telephone:				
Business Name:							
Address:	(State:	Zip Code:		
County:		Telephone:		·			
☐ Check enclosed (Made payable to: Missouri Department of Conservation)							
Credit/Debit card holder agrees to perform the obligations set forth in the Cardholder's agreement with the Issuer. As required by State Law, payments by debit or credit card will be charged an extra convenience fee according to the chart below. The fee will be added to the amount of the purchase and the cardholder's statement will show the combined amount. This fee is paid to the payment processor, not the Missouri Department of Conservation.							
	Transaction Amount	Fee A	mount				
	\$0-\$50.00	\$1.25 \$1.75 \$2.15					
	\$50.01-\$75.00						
	\$75.01						
	\$100.01 and up	2.1	5%				
Credit Card Type: U			sterCard		cover		
Expiration Date:		3-Digit	Security Code:				
Phone Number (<i>Required</i>):		Signatu	ıre:				
Mail app	Mail application to: Missouri Department of Conservation Attn: Commercial Permits P.O. Box 180 Jefferson City, MO 65102 Fax: (573) 751-4864 Email: COMMERCIAL PERMITS @MDC.MO.GOV						